

## ISSUE SLIP STAPLE AREA (for additional cross references)

TC 4/913

| POSITION                         | INITIALS | ID NO. | DATE     |
|----------------------------------|----------|--------|----------|
| <b>FEES DETERMINATION</b>        |          |        |          |
| <b>O.I.P.E. CLASSIFIER</b>       |          |        |          |
| <b>FORMALITY REVIEW</b>          | H-T      | 913    | 02/16/01 |
| <b>RESPONSE FORMALITY REVIEW</b> | M-T      | 593    | 03/20/01 |

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

| Claim | Date     |
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LAST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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